



Camp Connections: Cystinosis,

offers a special quarterly virtual gathering for kids living with this rare disease, bringing campers from across the country together through Zoom to build friendships with peers who truly understand their journey. With interactive activities like arts and crafts, STEM projects and game nights, campers can enjoy moments of joy, creativity and connection from wherever they are.

These quarterly sessions are part of **Camp Connections**, an innovative monthly virtual program hosted by the American Kidney Fund (AKF) that provides pediatric kidney patients with opportunities to connect, create and thrive alongside peers who share their experiences. Every new participant receives a welcome swag bag, along with monthly activity kits to kick off their camp adventure.

TO LEARN MORE ABOUT CAMP CONNECTIONS, PLEASE VISIT WWW.KIDNEYFUND.ORG/CAMP-CONNECTIONS OR REACH OUT WITH QUESTIONS!

CAMPCONNECTIONS@KIDNEYFUND.ORG





Camper Registration Form

Make Camp Connections part of your family's kidney disease journey. Enroll today and help your child start their virtual adventure!

Camper Name:						
Camper Birth Month:		Car	nper Birth Year:			
Are you a returning camper	?	Camper has	Cystinosis: No	Preferred Lan	guage: English	
Treatment Facility:						
Connection to Kidney Disea	ıse:					
Parent/Legal Guardian Nan	ne:					
Mailing Address:						
City:						
Email:	Phone:					
My family would like to re Camp Connections to ens General Release, Conser Signature is required by parent	sure every	child who wants ssignment	•			
I/we,	(and)		;	am/are the parent(s) and/or legal		
guardian(s) of		, the minor child participating in the participating in mp Connections virtual camp, hereinafter "my/our minor child."				
In consideration of participation to take pictures, photographs, Events and/or Activities and to Fund shall deem appropriate. shall be and remain the exclusion American Kidney Fund, without understand that AKF has a prince other initiatives, programs and	and/or vide o make use I/we under sive proper ut limitation vacy policy	eo (including red e of such picture estand that the co ty of the Americ n, the right to col	cordings) of my/our s, photographs and/ opyright to all such p an Kidney Fund. Furt lect and use informa	minor child in color videos as the abictures, photogra her, I/we grant petion about my/or	nnection with the American Kidney aphs and/or video ermission to the ur minor child. I/we	
Parent or Legal Guardian (P	rint)	Parent or L	egal Guardian (Sign)	Date	